## PATENT APPLICATION FEE DETERMINATION RECORD

1457/2052

| Effective October 1, 2003   |   |  |                       |                                     |              |                  |              |                   |                        |                           |                      | •                      |
|---|---|--|-----------------------|-------------------------------------|--------------|------------------|--------------|-------------------|------------------------|---------------------------|----------------------|------------------------|
| فيتحرب الكائن المتناقب المتناقب المتناقب والمتناقب والمتناقب والمتناقب والمتناقب والمتناقب والمتناقب                              |   |  |                       |                                     |              | ımn 21           |              | SMALL ENTITY      |                        | O'R                       | OTHER THAN           |                        |
| TOTAL CLAIMS  |   |  | .53                   |                                     |              |                  | [            | RATE              | FEE                    | ]                         | RATE .               | FEE                    |
| FOR   |   |  | NUMBER FILED          |                                     | NUMBER EXTRA |                  | •            | ASIC FE           | 385.00                 | OR                        | BASIC FEE            | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |  | <b>ぐろ minus 20=</b>   |                                     | . 33         |                  | l : [        | XS 9=             |                        | OR                        | X\$16=               | 594                    |
| INDEPENDENT CLAIMS  |   |  | √ minus 3 ±           |                                     |              |                  |              | X43=              |                        | OR                        | X86=                 | 86                     |
| MI  | JLTIPLE DEPE  | NDENT CLAIM P                                | RESENT                |                                     |              |                  |              | -145±             | ·                      | 1                         | -290=                | 76                     |
| * If the difference in column 1 is less than zero, enter "0" in   |   |  |                       |                                     |              | column 2         | L            | TOTAL             | <u> </u>               | OR                        | TOTAL                | 1450                   |
| CLAIMS AS AMENDED - PART II   |   |  |                       |                                     |              |                  |              | ·OIAL             | <u> </u>               | 100                       |                      |                        |
|   |   | (Column 1)                                   | (Column 2) (Column 3) |                                     |              |                  | SMALL ENTITY |                   | OR                     | OTHER THAN R SMALL ENTITY |                      |                        |
| AMENDMENT A   | 11.22.01  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    | •                     | HIGH<br>NUME<br>PREVIO<br>PAID I    | BER          | PRESENT<br>EXTRA |              | RATE              | ADDI-<br>TIONAL<br>FEE |                           | RATE                 | ADDI-<br>TIONAL<br>FEE |
| <b>∑</b>  | Total   | . 53   | Minus                 | - 5                                 | 3            | . —              |              | XS 9=             |                        | OR                        | XS18=                |                        |
| AME   | Independent   | · 4  | Minus                 | <b>1700</b>                         | 4            |                  |              | X43=              |                        | ОЯ                        | X86=                 |                        |
|   | FIRST PRESE   | ENTATION OF MU                               | TIPLE DE              | PENDENT                             | CLAIM        |                  | Ι.           | 145=              |                        | OR-                       | +290=                | حسسة                   |
|   |   |  |                       |                                     |              |                  |              | TOTAL             |                        | OR                        | TOTAL                |                        |
| 4.4.05 (Column 1) (Column 2) (Column 3)   |   |  |                       |                                     |              |                  |              | DIT, FEE          |                        | 10.1                      | ADDIT. FEE           | -                      |
|   | 700   | CLAIMS                                       |                       | HIGH                                |              | (Colonia 3)      | 1 _          |                   | ADDI-                  |                           |                      | ADDI-                  |
| AMENDMENT B   |   | REMAINING<br>AFTER<br>AMENDMENT              |                       | NUME<br>PREVIO<br>PAID E            | USLY         | PRESENT<br>EXTRA |              | RATE              | TIONAL<br>FEE          |                           | RATE                 | TIONAL<br>FEE          |
|   | Total   | .53  | Minus                 | 400                                 | <u> </u>     | . ——             | ,            | KS 9= -           | -                      | OR                        | X\$18=               |                        |
|   | Incependent   | . 4  | Minus                 | Z                                   | <u> </u>     | •                |              | K43=              |                        | GR                        | X86=                 | -                      |
|   | FIRST PRESE   | NTATION OF MU                                | LIPLE DEP             | ENUENI                              | CLAIM        | <b></b>          | ١,           | 145=              |                        | OR                        | +290=                |                        |
|   |   |  |                       |                                     |              |                  |              | TOTAL<br>DIT. FEE |                        | OR                        | . YOYAL<br>ODIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)  |   |  |                       |                                     |              |                  |              |                   |                        |                           |                      |                        |
| AMENDMENT C   | · .   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT    |                       | . HIGHE<br>NUMB<br>PREVIO<br>PAID F | ER<br>USLY   | PRESENT<br>EXTRA | F            | ATE               | ADDI-<br>TIONAL<br>FEE |                           | RATE                 | ADDI-<br>TIONAL<br>FEE |
|   | Total .   | •  | Minus                 | <b>.</b>                            |              | <b>.</b>         | ×            | <b>39-</b>        | ı                      | OR                        | X\$18=               |                        |
|   | Independent   | •  | Minus                 | ***                                 |              | •                | ,            | (43=              |                        | OR                        | X86=                 |                        |
|   | FIRST PRESE   | NTATION OF MU                                | LTIPLE DEP            | ENDENT                              | CLAIM        |                  |              | 145=              |                        | <b>~</b> "}               |                      |                        |
|   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |                       |                                     |              |                  |              |                   | ·                      | OR                        | +290=                |                        |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR ADDIT. FEE  OR ADDIT. FEE |   |  |                       |                                     |              |                  |              |                   |                        |                           |                      |                        |
|   |   | mber Previously Paid<br>iber Previously Paid |                       |                                     |              |                  | r tound i    | n the app         | ropriate box           |                           |                      |                        |
|   | 970 477 100-14  |  |                       |                                     |              |                  |              | -18               | on Office 11           | 050                       | DIMENT OF            | COMMERCE               |